



## WEEKLY CERTIFIED PAYROLL REPORTING FORM

NAME OF CONTRACTOR :Scaffold Resource LLC Subcontractor to Lend Lease - Old Post Office				CONTRACTOR'S LICENSE No. 3019247223 SPECIALTY LICENSE No.				ADDRESS : 9513 Lanham Severn Road , Lanham, Md 20706 PHONE: 301-924-7223 EMAIL: dford@scaffoldresource.com				PROJECT LOCATION/ CODE / NAME : Washington, DC / 46126400 / Trump Hotel											
PAYROLL No. 17		FOR WEEK ENDING: 11/08/2014 SUBMITTED ON: Februarv 20, 2015		MOTOR CARRIER PERMIT No.		UNION Non-Union		SELF-INSURED CERTIFICATE No. WORKERS' COMP. POLICY :		WAGE DECISION: DC 130002 7/05/2013													
NAME, ADDRESS, SSN, DRIVER'S LICENSE, ETHNICITY, GENDER		WORK CLASSIFICATION, LOCATION AND TYPE		HOURS WORKED EACH DAY				TOTAL HOURS	BASE HOURLY RATE	GROSS AMOUNT EARNED		DEDUCTION . CONTRIBUTION AND PAYMENTS				NET WGS PAID FOR WEEK	CHECK No.						
CAMPOS PASTORA, JUAN (b) (6)		LABO0657-015 / LABORER: Skilled / Type: Building		11/2/14	11/3/14	11/4/14	11/5/14	11/6/14	11/7/14	11/8/14	TOTAL HOURS THIS PROJECT	BASE HOURLY RATE OF PAY	THIS PROJECT	ALL PROJECTS	Federal Tax	Social Security	Medicare	State Tax	Local Taxes / SDI	Other	Savings	Total Deduction	Check No.
				S	M	T	W	TH	F	S	15.75	\$21.26		1,046.39	80.95	80.05	0.00	48.81	0.00	18.00	0.00	\$227.81	2213468
				S	8.00	7.75						\$0.00	\$334.85		Vac/Dues	Trav. Subs.	Health & Welfare	Pension	Vacation Holiday	Training	All Other	Total Fringes Paid to 3rd	Net Paid Week
				O								\$0.00			0.00	0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$107.57	107.57	818.58
				D								\$0.00			0.00	0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$107.57	107.57	818.58
All or Part of Fringes Paid to Employee: NO				Vacation, Holiday and Dues in Gross Pay: NO					Rate in Lieu of Fringes:	Total in Lieu of Fringes	Total Base Rate + Fringes	Voluntary Pension	Voluntary Medical	H & W Rate	Pension Rate	Vac Hol Rate	Training Rate	All Other Rate	Total Fringe Rate to 3rd				
				Voluntary Contributions in Gross Pay: NO					\$0.00	0.00	28.09	0.00	0.00	0.00	0.00	0.00	0.00	6.83	6.83				

OTHER DEDUCTION NOTES:DEN 18.00

CANTLER, JAMES (b) (6)				LABO0657-015 / LABORER: Skilled / Type: Building		11/2/14	11/3/14	11/4/14	11/5/14	11/6/14	11/7/14	11/8/14	TOTAL HOURS THIS PROJECT	BASE HOURLY RATE OF PAY	THIS PROJECT	ALL PROJECTS	Federal Tax	Social Security	Medicare	State Tax	Local Taxes / SDI	Other	Savings	Total Deduction	Check No.
						S	M	T	W	TH	F	S	15.75	\$32.00		1,584.00	151.41	102.20	0.00	46.19	31.12	233.06	0.00	\$563.98	2213472
						S	8.00	7.75						\$0.00	\$504.00		Vac/Dues	Trav. Subs.	Health & Welfare	Pension	Vacation Holiday	Training	All Other	Total Fringes Paid to 3rd	Net Paid Week
						O								\$0.00			0.00	0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$107.57	107.57	1,020.02
						D								\$0.00			0.00	0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$107.57	107.57	1,020.02
All or Part of Fringes Paid to Employee: NO				Vacation, Holiday and Dues in Gross Pay: NO					Rate in Lieu of Fringes:	Total in Lieu of Fringes	Total Base Rate + Fringes	Voluntary Pension	Voluntary Medical	H & W Rate	Pension Rate	Vac Hol Rate	Training Rate	All Other Rate	Total Fringe Rate to 3rd						
				Voluntary Contributions in Gross Pay: NO					\$0.00	0.00	38.83	0.00	0.00	0.00	0.00	0.00	0.00	0.00	6.83	6.83					

OTHER DEDUCTION NOTES:401K 140.40, ACC 4.59, CRI 10.57, DEN 8.30, OPMED 68.05, VIS 1.15

VASQUEZ, JOSE (b) (6)				LABO0657-015 / LABORER: Skilled / Type: Building		11/2/14	11/3/14	11/4/14	11/5/14	11/6/14	11/7/14	11/8/14	TOTAL HOURS THIS PROJECT	BASE HOURLY RATE OF PAY	THIS PROJECT	ALL PROJECTS	Federal Tax	Social Security	Medicare	State Tax	Local Taxes / SDI	Other	Savings	Total Deduction	Check No.
						S	M	T	W	TH	F	S	15.75	\$27.00		987.25	123.81	65.58	0.00	38.89	38.89	0.00	0.00	\$267.17	2213576
						S	8.00	7.75						\$0.00	\$425.25		Vac/Dues	Trav. Subs.	Health & Welfare	Pension	Vacation Holiday	Training	All Other	Total Fringes Paid to 3rd	Net Paid Week
						O								\$0.00			0.00	0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$107.57	107.57	720.08
						D								\$0.00			0.00	0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$107.57	107.57	720.08
All or Part of Fringes Paid to Employee: NO				Vacation, Holiday and Dues in Gross Pay: NO					Rate in Lieu of Fringes:	Total in Lieu of Fringes	Total Base Rate + Fringes	Voluntary Pension	Voluntary Medical	H & W Rate	Pension Rate	Vac Hol Rate	Training Rate	All Other Rate	Total Fringe Rate to 3rd						
				Voluntary Contributions in Gross Pay: NO					\$0.00	0.00	33.83	0.00	0.00	0.00	0.00	0.00	0.00	0.00	6.83	6.83					

CAMPOS PASTORA, LUIS		EXEMPT	LABO0657-015 / LABORER: Skilled / Type: Building									TOTAL HOURS THIS PROJECT	BASE HOURLY RATE OF PAY	THIS PROJECT	ALL PROJECTS	Federal Tax	Social Security	Medicare	State Tax	Local Taxes / SDI	Other	Savings	Total Deduction	Check No.											
(b) (6)					S	M	T	W	TH	F	S					15.75	\$21.26	71.70	81.14	0.00	48.61	0.00	61.03	0.00	\$262.48	2213469									
				S		8.00	7.75																												
				O														\$0.00																	
				D														\$0.00																	
		0	Washington, DC WD: DC 130002 7/05/2013	All or Part of Fringes Paid to Employee: NO										Vacation, Holiday and Dues in Gross Pay: NO Voluntary Contributions in Gross Pay: NO										Rate in Lieu of Fringes:	Total in Lieu of Fringes	Total Base Rate + Fringes	Voluntary Pension	Voluntary Medical	H & W Rate	Pension Rate	Vac Hol Rate	Training Rate	All Other Rate	Total Fringe Rate to 3rd	
														\$0.00	0.00	28.09	0.00	0.00	0.00	0.00	0.00	0.00	0.00	6.83	6.83										

OTHER DEDUCTION NOTES: DEN 8.30, OPMED 52.73

HERNANDEZ ORELLANA, MARVIN		EXEMPT	LABO0657-015 / LABORER: Skilled / Type: Building									TOTAL HOURS THIS PROJECT	BASE HOURLY RATE OF PAY	THIS PROJECT	ALL PROJECTS	Federal Tax	Social Security	Medicare	State Tax	Local Taxes / SDI	Other	Savings	Total Deduction	Check No.											
(b) (6)					S	M	T	W	TH	F	S					15.75	\$21.26	80.21	73.86	0.00	45.19	0.00	55.42	0.00	\$254.68	2213512									
				S		8.00	7.75																												
				O														\$0.00																	
				D														\$0.00																	
0		Washington, DC																																	
		WD: DC 130002 7/05/2013																																	
All or Part of Fringes Paid to Employee: NO												Vacation, Holiday and Dues in Gross Pay: NO												Rate in Lieu of Fringes:	Total in Lieu of Fringes	Total Base Rate + Fringes	Voluntary Pension	Voluntary Medical	H & W Rate	Pension Rate	Vac Hol Rate	Training Rate	All Other Rate	Total Fringe Rate to 3rd	
												Voluntary Contributions in Gross Pay: NO												\$0.00	0.00	28.09	0.00	0.00	0.00	0.00	0.00	0.00	6.83	6.83	

OTHER DEDUCTION NOTES: DEN 8.30, OPMED 47.12

MACKERT, PAUL		EXEMPT	LABO0657-015 / LABORER: Skilled / Type: Building									TOTAL HOURS THIS PROJECT	BASE HOURLY RATE OF PAY	THIS PROJECT	ALL PROJECTS	Federal Tax	Social Security	Medicare	State Tax	Local Taxes / SDI	Other	Savings	Total Deduction	Check No.											
(b) (6)					11/2/14	11/3/14	11/4/14	11/5/14	11/6/14	11/7/14	11/8/14																								
				S	M	T	W	TH	F	S						8.00	\$21.26		81.92	58.03	0.00	29.62	29.62	35.00	0.00	\$234.19	2213534								
				S			8.00													Vac/Dues	Trav. Subs.	Health & Welfare	Pension	Vacation Holiday	Training	All Other	Total Fringes Paid to 3rd	Net Paid Week							
				O																															
		0	Washington, DC WD: DC 130002 7/05/2013	D												0.00	0.00	\$0.00	\$0.00	\$0.00	\$54.64	54.64	\$24.32												
All or Part of Fringes Paid to Employee: NO												Vacation, Holiday and Dues in Gross Pay: NO												Rate in Lieu of Fringes:	Total in Lieu of Fringes	Total Base Rate + Fringes	Voluntary Pension	Voluntary Medical	H & W Rate	Pension Rate	Vac Hol Rate	Training Rate	All Other Rate	Total Fringe Rate to 3rd	
												Voluntary Contributions in Gross Pay: NO												\$0.00	0.00	28.09	0.00	0.00	0.00	0.00	0.00	0.00	6.83	6.83	

OTHER DEDUCTION NOTES: 401K 35.00

OLIVER, KEITH		EXEMPT	POWER EQUIPMENT OPERATORS / GROUP 3: Backhoes, cherry pickers, elevating graders, hoists, power shovels, gradalls, front end loaders-3 1/2		11/2/14	11/3/14	11/4/14	11/5/14	11/6/14	11/7/14	11/8/14	TOTAL HOURS THIS PROJECT	BASE HOURLY RATE OF PAY	THIS PROJECT	ALL PROJECTS	Federal Tax	Social Security	Medicare	State Tax	Local Taxes / SDI	Other	Savings	Total Deduction	Check No.											
(b) (6)				S	M	T	W	TH	F	S	40.00					\$31.43	278.57	203.22	0.00	119.07	53.25	0.00	0.00	\$654.11	2213550										
				S		10.50	10.25	10.75	8.50									Vac/Dues	Trav. Subs.	Health & Welfare	Pension	Vacation Holiday	Training	All Other	Total Fringes Paid to 3rd	Net Paid Week									
				O					1.75	8.75	8.00					18.50	\$47.15										2409208								
				D													\$0.00		0.00	0.00	\$0.00	\$0.00	\$0.00	\$481.46	481.46	2,186.31									
		0	Washington, DC WD: DC130002 Conformance R	All or Part of Fringes Paid to Employee: NO										Vacation, Holiday and Dues in Gross Pay: NO										Rate in Lieu of Fringes:	Total in Lieu of Fringes	Total Base Rate + Fringes	Voluntary Pension	Voluntary Medical	H & W Rate	Pension Rate	Vac Hol Rate	Training Rate	All Other Rate	Total Fringe Rate to 3rd	
		Voluntary Contributions in Gross Pay: NO										\$0.00	0.00	39.66	0.00	0.00	0.00	0.00	0.00	0.00	8.23	8.23													
NOTES:ck#2409208 (dtd 2-20-15) restitution payment 231.09reg hrs @1.43/ 136 or hrs @2.15 from 7-20-14 to 2-14-15 backup upload																																			

NOTES: ck#2409208 (did 2-20-15) restitution payment 231.09 reg hrs @ 1.43/ 136 ot hrs @ 2.15 from 7-20-14 to 2-14-15 backup upload

TOTAL STANDARD HOURS :	126.75	TOTAL 1.5 OT HOURS:	18.50	TOTAL 2.0 OT HOURS:	0.00	GRAND TOTAL HOURS:	145.25
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## Statement of Compliance

Date Friday, February 20, 2015

I, Darlene Ford, Payroll Manager do hereby state:

(1) That I pay or supervise the payment of the persons employed by SCAFFOLD RESOURCE LLC on the TRUMP HOTEL; that during the payroll period commencing on 11/2/2014 and ending on 11/8/2014 all persons employed on said project have been paid the full weekly wages earned, that no rebates have been or will be made either directly or indirectly to or on behalf of said SCAFFOLD RESOURCE LLC from the full weekly wages earned by any person and that no deductions have been made either directly or indirectly from the full wages earned by any person, other than permissible deductions as defined in Regulations, Part 3 (29 C.F.R. Subtitle A), issued by the Secretary of Labor under the Copeland Act, as amended (48 Stat. 948, 63 Stat. 108, 72 Stat. 967; 76 Stat. 357; 40 U.S.C. § 3145), and described below:

All comments are in the notes on the submitted Certified Payroll Report.

(2) That any payrolls otherwise under this contract required to be submitted for the above period are correct and complete; that the wage rates for laborers or mechanics contained therein are not less than the applicable wage rates contained in any wage determination incorporated into the contract; that the classifications set forth therein for each laborer or mechanic conform with the work he performed.

(3) That any apprentices employed in the above period are duly registered in a bona fide apprenticeship program registered with a State apprenticeship agency recognized by the Bureau of Apprenticeship and Training, United States Department of Labor, or if no such recognized agency exists in a State, are registered with the Bureau of Apprenticeship and Training, United States Department of Labor.

(4) That:

(a) WHERE FRINGE BENEFITS ARE PAID TO APPROVED PLANS, FUNDS OR PROGRAMS

[X] - in addition to the basic hourly wage rates paid to each laborer or mechanic listed in the above referenced payroll, payments of fringe benefits as listed in the contract have been or will be made to appropriate programs for the benefit of such employees, except as noted in section 4(c) below.

(b) WHERE FRINGE BENEFITS ARE PAID IN CASH

[ ] - Each laborer or mechanic listed in the above referenced payroll has been paid, as indicated on the payroll, an amount not less than the sum of the applicable basic hourly wage rate plus the amount of the required fringe benefits as listed in the contract, except as noted in Section 4(c) below.

(c) EXCEPTIONS:

EXCEPTION (CRAFT)	EXPLANATION
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REMARKS: *RESTITUTION PAYMENT ENTERED*

NAME: Darlene Ford

TITLE: Payroll Manager

Electronic Signature Code: (b) (6)

THE WILLFUL FALSIFICATION OF ANY OF THE ABOVE STATEMENTS MAY SUBJECT THE CONTRACTOR OR SUBCONTRACTOR TO CIVIL OR CRIMINAL PROSECUTION. SEE SECTION 1001 OF TITLE 18 AND SECTION 231 OF TITLE 31 OF THE UNITED STATES CODE.

**Other Deductions Notes**

<u>Employee Name</u>	<u>Craft</u>	<u>Classification</u>	<u>Other Deduction Notes</u>
CAMPOS PASTORA, JUAN	LABO0657-015	LABORER: Skilled	DEN 18.00
CAMPOS PASTORA, LUIS	LABO0657-015	LABORER: Skilled	DEN 8.30, OPMED 52.73
CANTLER, JAMES	LABO0657-015	LABORER: Skilled	401K 140.40, ACC 4.59, CRI 10.57, DEN 8.30, OPMED 68.05, VIS 1.15
HERNANDEZ ORELLANA, MARVIN	LABO0657-015	LABORER: Skilled	DEN 8.30, OPMED 47.12
MACKERT, PAUL	LABO0657-015	LABORER: Skilled	401K 35.00